

NUISANCE COMPLAINT

Location/Address		Assigned To	
COMPLAINANT <i>(Information Must Be Given)</i>		Received By	
Name	Phone	Date	Time
Address, City, State, Zip Code		Program	Code
COMPLAINT			
Name			Phone
Address			
Remarks			
INVESTIGATION & ACTION TAKEN			
Code Section Violated	First Contact	EHS	
Investigation and Action Taken	Follow-Up Date	EHS	
	Reinspected	EHS	
	Completion	EHS	
	Samples Taken #	EHS	
	Prob. Taken #	EHS	
Recommended Action	File	Hold Until	Submit For Legal
EHS			Date